

**LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A00000001455

1. Entity Name

Gaines Enterprise, LTD.

FILED

02 JUN 17 PM 4:43

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJH

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1761 Ocean View Drive  
Suite, Apt. #, etc.

3. Mailing Address

Same  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**DUE BY MAY 1**

City & State

Tierra Verde, FL

City & State

4. FEI Number

59-3704835

Applied For

Not Applicable

Zip

33715

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Casey Gaines

Street Address (P.O. Box Number is Not Acceptable)

1761 Ocean View Drive

City

Tierra Verde

FL

Zip Code

33715

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions

as Shown on record. \$10,000,000

10. Amount of Capital Contributions

in FLORIDA to date. \$3,000,000

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # A00000001455  
NAME Casey Gaines  
STREET ADDRESS 1761 Ocean View Drive  
CITY-ST-ZIP Tierra Verde, FL 33715

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

6/13/02 727-894-5511

CR2E003B (12/01)